

CALIFORNIA ACCESS TO RECOVERY EFFORT (CARE) PROGRAM OVERVIEW

Background

In March 2004, the federal Substance Abuse and Mental Health Services Administration released a \$100 million competitive grant for the Access to Recovery (ATR) Program. The ATR program is a Presidential initiative to allow people in need of substance abuse treatment to make individual choices in their path to recovery that reflect their personal values. The Department of Alcohol and Drug Programs (ADP), in collaboration with a stakeholder workgroup, designed California's ATR application. In August 2004, California was awarded \$7.6 million annually for three years for the California Access to Recovery Effort (CARE) program.

The overall goals and objectives of the CARE program are to:

- Significantly reduce California's youth treatment gap by providing vouchers for treatment and recovery support services to substance abusing youth ages 12-20 in Los Angeles and Sacramento Counties;
- Ensure individual consumer choice by expanding the number and types of service providers from which clients may choose;
- Engage and include faith-based and other nontraditional providers in the CARE program network; and
- Ensure youth receive safe and effective services by increasing provider competencies for serving youth and implementing a performance-based system.

CARE Partners' Roles and Responsibilities

ADP

ADP is the state agency receiving the federal grant funds being used for vouchers and is responsible for the overall success of the CARE voucher program. ADP approves eligible providers, monitors and assesses provider performance, identifies training and technical assistance needs and facilitates resources to meet those needs, collects and analyzes program data, and generally oversees and supports the program.

MAXIMUS

MAXIMUS, through a contract with ADP, is the CARE voucher manager. MAXIMUS is the largest provider of program management, consulting, and information technology services to state and local governments, and a leading service provider to the federal government. MAXIMUS staffs a call-in center for provider and client assistance; issues vouchers to clients; tracks voucher clients, services and associated costs; collects required outcome and financial data from providers; and reviews and authorizes

payment requests from providers. MAXIMUS also provides outreach and education to potential clients, providers and referral sources.

State Controller's Office (SCO)

The SCO processes payments authorized by MAXIMUS and makes payments directly to providers. The SCO audits tape claims and conducts onsite fiscal audits if fraud or abuse is suspected.

Steering Committee

The Steering Committee is a stakeholder group that provides oversight, guidance, and policy recommendations to ADP and MAXIMUS for implementation and program management. The Steering Committee evaluates and assesses the effectiveness of the program and assists ADP make adjustments and improvements as needed.

Assessment Centers

Assessment centers are the entry point for all CARE clients. Youth are referred to an assessment center from the call-in center, the CARE website, and other referral sources. Assessment centers are responsible for the following:

- Determining client eligibility;
- Conducting a comprehensive assessment in accordance with ADP's *Youth Treatment Guidelines*;
- Collecting the initial client data required by the Government Performance Results Act (GPRA);
- Identifying the level of treatment and/or recovery support services needed;
- Utilizing the CARE provider directory to identify service providers that match the level of treatment and recovery support services the client needs;
- Providing an unbiased explanation of the service options to the client to ensure that they can make an informed, individual choice about the service provider(s) that will best meet their needs and personal preferences. Individual choice means that the client is able to select from at least two providers qualified to provide the necessary services, with at least one to which the client has no religious objection.
- Involving the client's family/guardian, when appropriate, to assist and support the client during his/her decision process;
- Assigning a CARE coordinator to each client;
- Reporting all specified data to MAXIMUS; and
- Attending any training or performance review required by ADP.

CARE Coordinators

CARE coordinators are staff located at the assessment center who are assigned to a CARE client during the assessment process and continue to provide services until the client is discharged from the program. CARE coordinators are responsible for the following:

- Assisting the client access services via a voucher in the domains where need is identified (scheduling appointments with the client's chosen provider(s) and following up as necessary to ensure access to services);
- Facilitating program transfers and changes in treatment level, if warranted;
- Tracking the client's progress across CARE providers;
- Collecting required GPRA data from the client at specified intervals and submitting it to MAXIMUS; and
- Progress check-ins during aftercare (if treatment is completed but client is still receiving recovery support services).

Treatment and Recovery Support Service Providers

Treatment and recovery support service providers are responsible for the following:

- Accepting vouchers from clients who are appropriate for their services, as long as they have available capacity;
- Providing appropriate and allowable services to clients as authorized by the voucher and specified in service plans developed by the provider and the client;
- Reporting all specified data to MAXIMUS;
- Attending any training or performance review required by ADP;
- Protecting clients' personal information and participation in treatment or recovery services from unauthorized disclosure by complying with the federal confidentiality regulations related to the release of alcohol and drug abuse records (42 CFR Part 2); and
- Complying with the privacy and security requirements at 45 CFR Parts 160 and 164 (the Health Insurance Portability and Accountability Act regulations).

Overview of Program Processes

Program Referral

All potential CARE clients must first go to an assessment center. Referral sources will receive education and materials that instruct them to refer potential clients either directly to an identified assessment center or to the CARE call-in center or website. The call-in center staff and website information will refer potential clients to an assessment center.

Client Assessment

- The assessment center determines client eligibility and submits basic client information to MAXIMUS. MAXIMUS assigns a client identification number and issues an assessment voucher.
- The assessment center conducts an assessment, determines level of services, matches client's need with eligible and appropriate providers, and presents options to the client.

Voucher Issuance

- Based on the client's needs identified during the assessment, the assessment center submits a voucher request and initial GPRA data to MAXIMUS.
- MAXIMUS generates a voucher for the recommended services and authorizes payment for the assessment services. During normal business hours, vouchers will be generated by MAXIMUS immediately upon submission of the appropriate information from the assessment center.
- A voucher is an electronic record that provides evidence of ADP's agreement to pay an organization for allowable services provided to a CARE program client who requests such services. All vouchers are effective for three months from the date of issuance.
- Decisions related to voucher re-issuance and/or time extensions are made in conjunction with the client (and his/her family if appropriate), the CARE coordinator, the provider(s), and MAXIMUS.

CARE Coordination

- The assessment center assigns the client a CARE coordinator.
- The CARE coordinator assists the client to access services (contacts provider and ensures available capacity, makes intake appointment).
- While the client is receiving treatment and/or recovery support services, the CARE coordinator collects GPRA data from the client and submits it to MAXIMUS at required intervals (30 days after voucher issuance and every two months thereafter).

Service Provision and Payment

- Treatment and recovery support providers provide services to the client within the scope of the authorized voucher, and submit service data and invoices to MAXIMUS at least monthly.
- MAXIMUS authorizes payments and submits claims to the State Controller's Office (SCO). The SCO mails checks directly to providers within two weeks of receipt of authorized claims.

Treatment Services and Rates

The rates for authorized CARE clinical services are shown below. Detailed definitions and standards will be included in the policies and procedures manual.

Allowable Service	Service Rate
Assessment	\$150 per event
CARE coordination	\$15 per 15-minute increment
Treatment planning	\$64 per event
Individual counseling	\$106 per session
Group counseling	\$47 per session
Drug testing	\$20 per test
Individual family therapy	\$125 per session
Multiple family group therapy	\$75 per session
Education group	\$30 per session
Adolescent residential bed day	\$175 per day
Adult residential bed day	\$75 per day

Recovery Support Services and Rates

The service definitions and rates for authorized CARE recovery support services are shown below.

Educational Services

Educational services such as academic tutoring, homework assistance, life skills development, parenting responsibilities, family reunification, financial literacy, health promotion, and violence prevention. Also, educational enrichment activities such as sports, leadership development, recreational activities; skill building in visual or performing arts, music.

Educational services are reimbursable at \$42 per individual session or \$10 per individual in a group session. Both individual and group sessions must be between 60-90 minutes.

Employment Services

Employment services such as skills assessment and development, job coaching, career exploration, resume writing, interview skills, marketing skills, labor market information, job search assistance, job application assistance, and job retention tips.

Employment services are reimbursable at \$42 per individual session or \$10 per individual in a group session. Both individual and group sessions must be between 60-90 minutes.

Mentoring

Mentoring is a face-to-face, one-on-one contact between the client and an adult who is matched with the client by a sponsoring organization that is an eligible CARE provider. Mentoring is reimbursable at \$25 per 60-90 minute contact.

Spiritual Coaching

Spiritual coaching is helping an individual or group of individuals to develop spiritually to initiate or sustain recovery. Services may include establishing or reestablishing a relationship with a higher power, acquiring skills needed to cope with life-changing incidents, adopting positive values or principles, identifying a sense of purpose and mission for one's life, and achieving serenity and peace of mind, responsible decision making, social engagement and family responsibility.

Spiritual coaching is reimbursable at \$25 per individual session of 60 minutes or \$10 per individual in a group session of 60-90 minutes.

Childcare

Childcare means licensed (or license-waived) child care provided in compliance with state law regarding child care facilities. Childcare may be provided for the client's child(ren) while the client is participating in CARE services. Childcare is reimbursable at \$10 per hour.

Transportation

Transportation of clients receiving CARE services must be provided by an authorized provider in vehicles owned by the agency for the purpose of transporting clients and only for the purpose of access to CARE services. Transportation is reimbursable only when the following criteria are met: 1) there is no other payment source for this service; 2) the client has no reliable transportation alternative; and 3) there is no public transportation available or the use of public transportation would create a hardship on the client.

Transportation is reimbursable at the state-approved mileage rate (\$.34 per mile) for a maximum of 500 miles per client.

CARE Provider Directory

A CARE provider directory will be available to assist clients to make informed choices regarding service providers. The directory will contain provider profiles that will include information on services offered, service settings, program specialties, and therapeutic models, philosophies or approaches. Providers must notify MAXIMUS whenever there are changes to program information, such as a change in program location, contact information, types of services offered, hours of operation, etc.

Performance Evaluation

As mandated by the grant requirements, ADP will review and evaluate providers to determine success in meeting CARE program goals related to client improvements in the following domains:

- Retention in treatment;
- Alcohol and drug use;
- Employment and/or education;
- Crime/criminal justice involvement;
- Family and living conditions; and
- Social support of recovery.

With advance notice, providers will be expected to participate in periodic regional performance meetings. The purpose of the meetings will be to involve providers in determining where improvements can be made, encourage problem-solving to improve performance, and identify technical assistance and training needs and resources.

Dispute Resolution

Providers must have grievance procedures in place that a client can use to seek resolution of any program-related dispute with the provider. The grievance procedure must assure that the client will receive a full, fair and timely review of the disputed matter. Providers must inform each client of the grievance procedures upon admittance. The procedures must include ADP's address and contact telephone number and notification that if an acceptable solution to a dispute cannot be reached, either the provider or the client may refer the dispute to ADP for resolution.